

TRANSMITTAL FORM    Filing Date   12/19/2003   First Named Inventor   MARSHALL   Art Unit   3632   Examiner Name   Kimberly T. Wood     Total Number of Pages in This Submission   After Allowance Communication to TC   Licansing-related Papers   After Allowance Communication to TC   Appeal Communication to TC   Appeal After Final   Petition to Convert to a   Provisional Application   Power of Attorney, Revocation   Affidavits/declaration(s)   Affidavits/declaration(s)   Affidavits/declaration for TC   Cartified Copy of Priority   Document(s)   Landscape Table on CD   Remarks	TO A PROPERTY OF THE Paperwork Reduction Act of 1995	U.S. F	PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031 Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE billection of information unless it displays a valid OMB control number.
ENCLOSURES (Check all that apply)  Fee Transmittal Form    Drawing(s)	TRANSMITTAL FORM  (to be used for all correspondence after initial	Application Number  Filing Date  First Named Inventor  Art Unit  Examiner Name	10/739,080 12/19/2003 MARSHALL 3632 Kimberly T. Wood
Document(s)  Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53  SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT  Firm Name	Fee Attached  Amendment/Reply  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request	Drawing(s)  Licensing-related Papers  Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence A  Terminal Disclaimer Request for Refund  CD, Number of CD(s)	After Allowance Communication to TC  Appeal Communication to Board of Appeals and Interferences  Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter  Other Enclosure(s) (please Identify below):
Berenato, White & Stavish, LLC  Signature  Printed name  Joseph W. Berenato, III  Date  12/01/2005  Reg. No. 30,546			

## **CERTIFICATE OF TRANSMISSION/MAILING** I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature Typed or printed name

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (12-04v2) Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE work Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMR control number Effective on 12/08/2004. Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** 10/739,080 TRANSMIT Filing Date 12/19/2003 For FY 2005 First Named Inventor MARSHALL **Examiner Name** Kimberly T. Wood Applicant claims small entity status. See 37 CFR 1.27 Art Unit 3632 TOTAL AMOUNT OF PAYMENT (\$) \$475.00 Attorney Docket No. 6247.460 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 50-0548 Deposit Account Name: Berenato, White & Stavish For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) ✓ Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity Small Entity Small Entity Application Type** Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 Design 200 100 100 130 50 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 600 250 300 Provisional 200 100 0 0 2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$) Each claim over 20 (including Reissues) 50 25 200 100

Each independent claim over 3 (including Reissues)

Multiple dependent claims

**Total Claims** Extra Claims Fee (\$) - 20 or HP = HP = highest number of total claims paid for, if greater than 20.

Indep. Claims **Extra Claims** Fee (\$) - 3 or HP =

HP = highest number of independent claims paid for, if greater than 3.

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof

Fee Paid (\$)

Fee Paid (\$)

**Total Sheets** Fee Paid (\$) / 50 = (round up to a whole number) x

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Notice of Appeal and Two-month Extension of Time

Fees Paid (\$) \$475.00

360

Fee (\$)

180

Fee Paid (\$)

**Multiple Dependent Claims** 

SUBMITTED BY			717		
Signature	<b>1</b>	W	10	Registration No. (Attorney/Agent) 30,546	Telephone 301-896-0600
Name (Print/Type)	Joseph V	W Berena	ito, III		Date 12/01/2005

This collection of information required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.